

**INFORMATIONAL LETTER NO.1988-MC-FFS**

**DATE:** February 25, 2019

**TO:** Iowa Medicaid Hospitals (Excluding Critical Access Hospitals)

**APPLIES TO:** Managed Care, Fee-for-Service  
**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** 30 Day Hospital Readmission- Exclusion for Planned Procedures

**EFFECTIVE:** May 1, 2019

In an effort to more closely align with CMS standards and policies, Iowa Medicaid is amending the current inpatient readmission policy by adding exclusions for planned procedures and diagnoses. Proposed rules amending current policy have been submitted. The effective date for this change is May 1, 2019. All other requirements outlined in [Informational Letter 1585](#)<sup>1</sup> remain in effect.

CMS does not count planned readmissions as readmissions for the 30-day readmission measures. Readmissions are considered planned, if any of the following occurs during readmission:

1. A procedure is performed that is one of the procedure categories that are always planned regardless of diagnosis
2. The principal diagnosis is in one of the diagnosis categories that are always planned

Procedure categories that are considered always planned are bone marrow transplants; kidney transplants; cesarean section delivery; forceps, vacuum, and breech delivery; and other organ transplantation.

Diagnosis categories that are considered always planned are maintenance chemotherapy, radiotherapy, forceps delivery, other pregnancy and delivery including normal, and rehabilitation care.

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909, locally 515- 256-4609 or by email at [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us).

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<sup>1</sup> [https://dhs.iowa.gov/sites/default/files/1585\\_InpatientReadmissionswithin30DaysforSameCondition.pdf?022520192036](https://dhs.iowa.gov/sites/default/files/1585_InpatientReadmissionswithin30DaysforSameCondition.pdf?022520192036)